

Appointments for Recreation Center volunteers only: 410-396-7605 (Personnel Unit)
 Mon.-Fri. 9:00 a.m. - 4:00 p.m. If you cannot make it by 4:00 p.m., please call in advance since
 our last prints of the day are taken at **4:00 p.m. YOU MUST BRING ID!**

Volunteer Application



BALTIMORE CITY
 RECREATION & PARKS

Contact Information

| | |
|-----------------------|------|
| Name: | |
| Street Address: | |
| City ST ZIP Code: | |
| Home Phone: | |
| Company You Work For: | |
| Work Phone: | |
| E-Mail Address: | |
| Birth date: | Age: |

Availability

During which hours are you available for volunteer assignments?

☐ Weekday mornings

☐ Weekend mornings

☐ Weekday afternoons

☐ Weekend afternoons

☐ Weekday evenings

☐ Weekend evenings

What hours would you like to work?

FROM _____ (AM / PM) TO _____ (AM / PM)

What days of the week would you like to work?

☐ Monday ☐ Tuesday ☐ Wednesday

☐ Thursday ☐ Friday ☐ Saturday

Interests

Tell us in which areas you are interested in volunteering (you can check more than one):

☐ Recreation Centers

☐ Licensed Child Care (age 5-13)

☐ Aquatics

☐ Special Events

☐ Sports

☐ Parks / park cleanups

☐ Tree Plantings

☐ Howard P. Rawlings Conservatory

☐ Cylburn Arboretum

☐ Youth Development

☐ Parent Advisory Council

☐ Mentoring youth

☐ Helping people with disabilities

OTHER INFO:

Which recreation center(s)?

Which location?

Where?

Which special events interest you?

Which sports?

Which park?

Where?

Which park(s)?

Are you a parent of a Center youth? ☐ Yes ☐ No

- | | |
|--|---|
| <input type="checkbox"/> Senior Citizens | |
| <input type="checkbox"/> Fundraising | Area of expertise? |
| <input type="checkbox"/> Tutoring/Homework assistance | Subject matter expertise? |
| <input type="checkbox"/> Computers | Area of expertise? |
| <input type="checkbox"/> Field trips | |
| <input type="checkbox"/> Horticulture/gardening | |
| <input type="checkbox"/> Marketing/publications | |
| <input type="checkbox"/> Volunteer coordination | |
| <input type="checkbox"/> Special facility/soccer arena | Which facility would you like to serve? |
| <input type="checkbox"/> Other | |

Special Skills or Qualifications

Summarize special skills and qualifications you have acquired from employment, previous volunteer work, or through other activities, including hobbies or sports. Attach an additional sheet if necessary.

Previous Volunteer Experience

Summarize your previous volunteer experience.

Person to Notify in Case of Emergency

| | |
|----------------------|--|
| Name: | |
| Relationship to You: | |
| Street Address: | |
| City ST ZIP Code: | |
| Home Phone: | |
| Work Phone: | |
| E-Mail Address: | |
| Cell phone: | |
| | |

Do you have any health issues or medications that we should know about in an emergency?

Yes _____ No _____

If Yes, please identify issues or medications: _____

Background Information

Have you ever been convicted of a felony?

___ Yes ___ No

To ensure the safety of our children, the Department of Recreation and Parks requires that all volunteers and staff who work directly with youth must be fingerprinted and undergo a background check with the Maryland State Police.

Do you consent to do this?

___ Yes
___ No

Agreement and Signatures

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a volunteer, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal.

| | |
|--|--|
| Volunteer Name (printed) | |
| Signature | |
| Today's Date | |
| Parent Signature if Junior Volunteer (age 14 or under) | |

Our Policy

It is the policy of this organization to provide equal opportunities without regard to race, color, religion, national origin, gender, sexual preference, age, or disability.

Completed Application Instructions

Thank you for completing this application form and for your interest in volunteering with us. If you are volunteering at a Recreation Center, call for an appointment at 410-396-7605 (Personnel Unit) Mon.-Fri. 9:00 a.m. - 4:00 p.m. For all other volunteers, email application to mary.hardcastle@baltimorecity.gov or drop off at Baltimore City Recreation & Parks, 3001 East Drive, Baltimore, MD 21217.

| | |
|--------------------------------|--|
| Center/Park Director Signature | |
| Center/Park/Unit Name | |
| Date | |

OFFICE USE ONLY:

Date Fingerprinted: _____ by _____

Cleared: _____ Not Cleared _____

(date)

(date)